

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*
	IND.	DEP.	IND.	DEP.	IND.	DEP.			
1	/		/				51		
2		/		/			52		
3		/					53		
4				/			54		
5				/			55		
6		/		/			56		
7		/		/			57		
8	/		/				58		
9		/					59		
10				/			60		
11				/			61		
12				/			62		
13	/		/				63		
14				/			64		
15				/			65		
16				/			66		
17				/			67		
18				/			68		
19				/			69		
20	/		/				70		
21				/			71		
22				/			72		
23				/			73		
24				/			74		
25	/		/				75		
26		T		/			76		
27				/			77		
28				/			78		
29	/		/				79		
30				/			80		
31				/			81		
32				/			82		
33		/	/				83		
34		/	/				84		
35			/				85		
36			/				86		
37			/				87		
38			/				88		
39			/				89		
40			/				90		
41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	6		14				TOTAL IND.		
TOTAL DEP.	253		23				TOTAL DEP.		
TOTAL CLAIMS	259		37				TOTAL CLAIMS		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS